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## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	AUTOMATIC COLLECTION MANAGER
As the below named	inventor(s), I/we declare that:
This declaration is di	rected to:
	The attached application, or
l	Application No, filed on,
	as amended on(if applicable);
I/we believe that I/we sought;	e am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is
	and understand the contents of the above-identified application, including the claims, as amended by any ally referred to above;
material to patentabi	e duty to disclose to the United States Patent and Trademark Office all information known to me/us to be ility as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which etween the filing date of the prior application and the national or PCT International filing date of the application.
to be true, and furth	herein of my/own knowledge are true, all statements made herein on information and belief are believed the that these statements were made with the knowledge that willful false statements and the like are in imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any on.
FULL NAME OF INV	
Inventor one: William	
Signature:	Citizen of: United States of America
Inventor two: Roder	
Signature:	Citizen of: United States of America
Inventor three:	
Signature:	Citizen of:
Inventor four:	
Signature:	Citizen of:
Additional inver	ntors or a legal representative are being named onadditional form(s) attached hereto.

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number		1
Filing Date		_
First Named Inventor	William M. Nichols	_
Title	AUTOMATIC COLLECTION MANAGER	Τ
Art Unit		
Examiner Name		_
Attorney Docket Number	NORT 64305	7

I hereby	appoint:			•		_
✓ Practitioners associated with the Customer Number: 29694						
	OR  Practitioner(s) named below:					
F	Name Registration Number					
as my/ou Tradema	ur attorney(s) or agent(s ark Office connected the	s) to prosecute the application identi erewith.	ified above,	and to tra	ansact all business in	the United States Patent and
Please r		correspondence address for the ab			ation to:	
OR  The address associated with Customer Number:						
O	R				·	
<b>√</b>	Firm or Individual Name	Robert P. Lenart				
A	ddress	Pietragallo, Bosick & Gordon				
	ddress	One Oxford Centre, 38th Floor, 30	1 Grant Str	et		
	ity	Pittsburgh		State	PA	Zip 15219
	ountry	USA				
	Telephone (412) 263-4399 Fax (412) 261-0915					
l am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Name	William Mark Nicho	s //				
Signature // White half lix						
Date 2/26/04 Telephone (3(8)618-4670						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
✓ .T	*Total of forms are submitted.					

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## **POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS INDICATION FORM**

Application Number		\
Filing Date		
First Named Inventor	William M. Nichols	_
Title	AUTOMATIC COLLECTION MANAGER	_
Art Unit		_
Examiner Name		_
Attorney Docket Number	NORT 64305	7

I hereby appoint:				
Practitioners associated	with the Customer Number:	2	9694	
OR				
Practitioner(s) named bel	low:			
	Name		Registrat	tion Number
			-	
as mylour atternay(s) or agent(s	s) to prosecute the application identif	ind above, and to	transact all busin	one in the United States Detent and
Trademark Office connected the		ieu above, and it	transact all busin	ess in the United States Patent and
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OR			····	_
Firm or Individual Name	Robert P. Lenart			
Address	Pietragallo, Bosick & Gordon			
Address	One Oxford Centre, 38th Floor, 301	1 Grant Street		
City	Pittsburgh	Stat	PA PA	Zip 15219
Country	USA	Te	1	
Telephone I am the:	(412) 263-4399	Fax	(412) 261-091	5
Applicant/Inventor.				
	he entire interest. See 37 CFR 3.71.			
Statement under 37 CI	FR 3.73(b) is enclosed. (Form PTO/S	<del></del>	**	
	SIGNATURE of Applic	cant or Assigne	e of Record	
Name Roderic Murufas	40			
Signature	Murifly			1/2-12-15-1
Date	46 179H) 64		Telephone	1000000
NOTE: Signatures of all the inventors forms if more than one signature is re	s or assignees of record of the entire inter equired, see below*.	est or their represe	ntative(s) are require	d. Submit multiple
▼ *Total of 2 f	forms are submitted.			

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